

1. Organized surveys and monitoring by UN can collect useful data regarding the status, suffering and needs of the Afghans, specially those of the children.
2. For the amputees adequate prostheses should be arranged from the beginning with their periodic changing in children as they grow.
3. Deafness, specially nerve deafness may be very hard to cure, if at all. Other forms need ENT help.
4. Epidemic conjunctivitis should be easy and relatively inexpensive to treat and would avoid blindness in large number of children. Needs assessment in this group should be carried out.
5. Avitaminosis and mineral deficiencies may be treated by vaccinators who could provide these capsules to the children at the time of vaccination. Alternatively, these could be made available at the local hospitals if their downstream distribution could somehow be guaranteed.
6. Rehabilitation of children through reconstructive surgery may be arranged at relatively low cost either at the Afghan Rehabilitation and Training Services, Peshawar or by establishing a similar center inside Afghanistan.
7. Awareness
Making people aware of health, hygiene and vaccinations is needed.
8. Radio transmissions would be very good method to do so.
A workable system of retrievable health and vaccination record cards should be started at the local health center level.
9. Coordination of vaccinating agencies is essential.

10. As people are always confused which vaccination did they receive and have no idea what DPT 1 or 2, polio, measles or BCG means, I suggest the vaccine ampoules should be coloured red for DPT 1 and Polio, green for DPT 2 and Polio, yellow for measles and white for BCG. At the time of vaccination the children and their parents should be told of the colour of their vaccination.

AREAS SURVEYED BY PAKTIA A TEAM

POINT OF ENTRY: PARACHINAR

DISTRICT: CHAMKANI

1. Gody Kelai
2. Miana
3. Bajial
4. Sarwy
5. Tanai
6. Khabrani
7. Noozei
8. Alam Kily
9. Seheb Zadagan
10. Pir kily
11. Mangiol
12. Star Kily
13. Gada Khel
14. Pashto Kily
15. Kotkai
16. Naghosha
17. Haji Mili

AREAS SURVEYED BY PAKTIA B TEAM

POINT OF ENTRY: PARACHINAR - SHEHRI NAU

DISTRICT: MUSA KHEL - JANI KHEL

- | | |
|------------------|---------------|
| 1. Fazly Kohl | 26. Agar kohl |
| 2. Shrie Khel | 27. Woly |
| 3. Narm | |
| 4. Alej Kohl | |
| 5. Moa Kohl | |
| 6. Chachtoon | |
| 7. Dorghani | |
| 8. Mir Gul | |
| 9. Kawkhola | |
| 10. Khabut | |
| 11. Moban | |
| 12. Khalilan | |
| 13. Gerdi Khola | |
| 14. Lodal Gale | |
| 15. Bacha Kot | |
| 16. Slorole | |
| 17. Alveshommina | |
| 18. Barakhol | |
| 19. Goly | |
| 20. Khale | |
| 21. Woch Kholy | |
| 22. Zadoor Khola | |
| 23. Pale | |
| 24. Moni khol | |
| 25. Mia kohl | |

AREAS SURVEYED BY KUNAR TEAMPOINT OF ENTRY IN AFGHANISTAN: BAJAWARDISTRICTVILLAGES

- | | |
|------------------|-------------------------------------------------------------------------------------------------------------------|
| 1. Peage | 1. Senzi 2. Kalemo 3. Saidoor 4. Barkand
5. Sheeraki |
| 2. Chappa darah: | 6. Said Khel 7. Bahedeer Kaly 8. Badgah
9. Karak 10. Karamara 11. Khadee Khel
12. Watta galla |
| 3. Watappor | 13. Say Cat 14. Katam galle 15. Quroo
16. Sheheed Kely 17. Kandro Kely |
| 4. Marrawra: | 18. Chahar Mango 19. Sarkeree galle 20. Shon Kri |
| 5. Assadabad. | 21. Damme Killy 22. Kerrare 23. Bara Tesha
24. Newabad 25. Khan Killy |
| 6. Narang. | 26. Ber Narang 27. Keatkay 28. Chinar Kily
29. Ghondo Kily 30. Dag Killy 31. Ghondo Pagan |
| 7. Sawki. | 32. Nagora 33. Qandari 34. Pandoni Kily
35. Kulmani Kily 36. Marano Killy
37. Karwande Kily 38. Kawzateshah |
| 8. Gang gall. | 39. Sarobi 40. Damma Dara |

QUESTIONNAIRE (Village Level)

Name of the Village

Province

Demographic Date (estimated)

	Before War	1990
Population Total Adult - Male - Female 5 - 15 Boy Girl Under 5 Boy Girl		
No. of Families		
No. of houses Not damaged Partially damaged		
Comments		

QUESTIONNAIRE (Family Level)

Appendix 4a

Name of the Family _____ Village _____ CATEGORY
Severe Moderate Slight

No. of Family Members	< 1	< 5	5 -- 15		Adult	
			Male	Female	Male	Female (Pregnant)
A. War wounded						
1. Loss of Upper limb AE						
2. Loss of Upper Limb BE						
3. Loss of Lower Limb AK						
4. Loss of Lower Limb BK						
5. Disfigurement						
6. Burns 75 - 50%						
7. Burns 50 - 30%						
8. Burns Less than 30%						
9. Burn Contracture						
10. Head Injuries						
11. Spinal Injuries						
12. Mental/Psychiatric						
13. Eye Injuries/Blindness						
14. Deafness						

Objectives:

1. To assess the status of nutrition, health, physical, mental and other damages to children and adults due to War (1979-1990) in 3 randomly chosen areas of 2 provinces of Afghanistan, Paktia and Kunar.
2. Recommend measures to alleviate or eliminate these problems affecting the children.

Beneficiaries: Afghan children in General and children of Paktia and Kunar in particular.

METHOD:

45 villages in 2 different areas of Paktia province of Afghanistan and 40 in Kunar province were visited by 3 teams consisting of an Afghan MD, and paramedical personnel and their assistants (See appendix 1 and 2)

Their assignment was to survey the damage done by the Afghan War (1979-1990) to the children, their parents and relatives, their homes, schools, hospitals and villages.

For this assessment the villages were chosen at random and categorized as severely, moderately and slightly damaged. All the inhabitants of the villages were counted, and the sick or disabled people segregated and the preprinted forms filled in (appendix 3 and 4). Further, 2734 children were subjected to a different type of analysis as in appendix 5.

RESULTSA. DEMOGRAPHIC STUDY

Total number of villages visited	85
Total number of families visited	1,716
Total number of people examined	15,533
Total number of children examined	3,220
Total number of children participating in Child Assessment	2,734

B. SURVEY OF VILLAGES & POPULATION

Total No. of houses	Paktia (A)	465	
	Paktia (B)	928	
	Kunar	3,631	
		<u>5,024</u>	
Partially damaged	Paktia (A)	294	
	Paktia (B)	389	
	Kunar	966	
		<u>1,648</u>	or 33%
Not damaged	Paktia (A)	673	
	Paktia (B)	136	
	Kunar	2,506	
		<u>3,315</u>	or 66%
Population before 1979	Paktia (A)	6,201	
	Paktia (B)	11,791	
	Kunar	74,179	
		<u>91,762</u>	
Present population	Paktia (A)	6,184	
	Paktia (B)	8,777	
	Kunar	20,207	
		<u>35,168</u>	or 38.3% of pre-War population
		Migration	61.7%

C. SURVEY OF DISEASES AND DISABILITY

	<u>Kunar</u>	<u>Paktia A</u>	<u>Paktia B</u>	<u>Total</u>
Number of people seen	5130	2958	7445	15,533
<u>A. War Related</u>				
1. Loss of Upper limb above elbow	45	18	10	73
2. Loss of Upper limb below elbow	52	28	10	90
3. Loss of Lower limb above knee	50	16	5	71
4. Loss of Lower limb below knee	58	31	12	101
5. Disfigurement	48	6	5	59§
6. Burns Less than 30%	5	2	5	12§
7. Burns 30 - 50%	-	11	1	12§
8. Burns 50 - 75%	1	4	3	8§
9. Burn Contracture	17	2	-	19§
10. Head Injuries	26	28	1	55
11. Spinal Injuries	21	32	17	70
12. Mental/Psychiatric	17	15	6	38
13. Eye Injuries/Blindness	39	10	4	53
14. Deafness	65	35	2	102
Sub total:	444	238	81	763
% of Healthy people:	8.65%	8%	1.1%	
<u>B. Non-War related</u>				
15. Polio	45	115	20	180§
16. Meningitis/Encephalitis	46	2	26	74
17. Eye Infection	215	28	31	274
18. Vit A deficiency	70	100	90	260
19. Cleft palate/lips	20	4	2	26§
20. Club foot/lower extremities	4	5	32	41§
21. Upper extremities	11	8	9	28
22. Deafness	38	10	34	82
23. Blindness	43	10	10	63
Sub total:	492	282	254	1028
% of Healthy people:	9.6%	9.5%	3.4%	
Total:	936	520	335	1791
% of Healthy people:	18.25%	17.5%	4.5%	
% War-related illnesses to healthy population				4.91
% Non-War-related illnesses to healthy population				6.61
% of ill to healthy persons				11.52

§ Disabilities that can be removed by Reconstructive Surgery: 357 or 20%

D. ASSESSMENT OF 2,734 CHILDREN

Age Yrs	Weight KG	Height cm	Mid-upper arm circumference cm
0-2	8.62	61.1	7.68
2-4	12.78	83.7	12.5
4-10	26.0	122.45	21.6
10-15	31.9	199.5	23.35

ANALYSIS OF RESULTS

61.7% of population had vacated villages presumably due to more severe problems than those afflicting the residual population (Paktia A 0.3%, Paktia B 23% and Kunar 72.76%).

1716 families comprising 15,533 people (9.0 per family) lived in 85 villages i.e. 20.18 families or 182.7 people per village. In 1716 families there were 3,220 children i.e. 1.9 children per family and 20.7% of the total population.

763 of War-Related Illnesses were found, in 8.65% population of Kunar, in 8% of population of Paktia A and in 1.1% of population of Paktia B. Although deafness as a single entity was present in 102 cases (13.3% of War-related illnesses or 0.66% of population) and loss of lower limb below knee (13.2% War-related illness or 0.65% total population) closely following it. Cases which needed reconstructive surgery i.e. disfigurements, burns and burn contractures together comprised of 110 cases (14.4% of War-related illnesses or 0.7% of total population) & as a group, topped the list.

Among the 1028 Non-War Related Illnesses, eye infection was present in 274 patients (26.6% of Non-War related illnesses) and made up the largest single group, and was present in 1.76% of total population. This was followed by 260 cases of Vit A deficiency i.e. 25.29% of Non-War related illnesses or 1.67% of total population.

Polio was seen in 180 cases, 17.50% of Non-War related illnesses or 1.15% of total population.

If one would think of rehabilitation, Polio, needing tendon lengthening or muscle transfer in order to walk and work better, could be added to the group requiring reconstructive surgery (disfigurements, burns and burn contractures). Together, they would make up the largest group of 290 cases, 16.1% of all illnesses, and present in 1.87% of total population

It would be followed by 274 cases of epidemic conjunctivitis, 15.2% of all illnesses and present in 1.76% of total population, Vit A deficiency (260 cases, 14.5% of all illness and present in 1.67% of total population) and deafness (related or not related to War) totalling 184 cases.

Geographical spread of the damage indicates War-related and Non-War related illnesses in Kunar (8.65% and 9.6% respectively) and in Paktia A (8% and 9.5% respectively), to be much higher than in Paktia B (1.1% and 4.5% respectively).

2,734 children out of children population of 3220 or 85% were assessed as to their weight, height, Mid Upper Arm Circumference and Status of immunization.

Destruction of houses

Of a total of 4964 houses visited 1649 (33.21%) were partially damaged and 3315 (66.7%) not damaged. Totally damaged houses, obviously, could not be counted. Paktia A had 30.40%, Paktia B had 74.09% and Kunar had 27.82% of its houses damaged partially.

Migration

Of a total of 91,762 people in 1979, only 35,168 (38.32%) were still living there i.e. 61.68% had migrated. In Paktia A 99.7% of its pre-war population was present in 1990 (0.3% migrated), in Paktia B 77.05% (22.95% migrated) and in Kunar 27.24% of its population was present and 72.76% had migrated.

OTHER IMPORTANT FINDINGS

1. Endemics of
 - a. Malaria. A couple of children were sick with malaria in most houses in different villages. The time of survey was the season for malaria. Everybody wanted treatment of malaria only.
 - b. Pellagra (B3 deficiency with dermatitis, dementia and diarrhea) was also found in sporadic form. Those children who died of diarrhea due to Pellagra were not recorded, but those who survived were reported in mental/psychiatric diseases.
 - c. Vit A deficiency had resulted in many cases of blindness reported under Non-War related blindness.
 - d. Multivitamin & mineral deficiency was seen in large number of persons.
 - e. Goiter in endemic form was seen in some villages.
2. Hospitals: The structures existed without doctors or medicine. Some others were running on paracetamol and procain-penicillin injections only. So the people were not medically serviced and were averse to the name doctor—a very unusual finding.
3. Schools: Upto grade 6 only were seen in most villages. Attendance is good except during harvest season. They are run by different Afghan Political Parties. Teachers are paid 500 - 800 Pk Rs per month.

4. Mines: In most villages and outside the villages conquered by Mujahideen mines have still not been cleared and people are afraid of them.
5. Security: Travel is possible only through the goodwill of the Mujahideen Office for that area. Others may be apprehended, kidnapped for ransom or killed for spying by people who cannot be traced.
6. Malnutrition:
Cases of avitaminosis, anemia and goiter were seen in sporedic form but starvation didn't exist.
7. Vaccination:
It was widespread (given, some times in overlapping form, by more than one team, "UNICEF and Arab", apparently unaware of each other's performance. Cards were not available with the children and not retrievable at the local dispensary/hospital.

SURVEY OF MALNUTRITION, DISABILITY, IMMUNIZATION
AND WAR DAMAGE IN 85 VILLAGES IN KUNAR AND PAKTIA
PROVINCES OF AFGHANISTAN

SPONSORED BY: UNICEF (AFGHAN), PESHAWAR

IMPLEMENTED BY: AFGHAN REHABILITATION AND
TRAINING SERVICES (ARTS),
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DATE: SEPTEMBER, OCTOBER, NOVEMBER, 1990

BY

DR JAVED IQBAL, MD, FRCS, FICS

No. of Family Members	<1	<5	5 -- 15		Adult	
			Male	Female	Male	Female (Pregnant)
B. Non - War related						
15. Polio						
16. Meningitis/Encephalitis						
C. Eye						
17. Eye Infection						
18. Vit A deficiency						
D. Congenital/Others						
19. Cleft palate / lips						
20. Club foot/lower extremities						
21. Upper extremities						
22. Deafness						
23. Blindness						
24.						
25.						